

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

7-2-01 A

J1031 U.S. PTO  
06/29/01

Applicant: Mary F. Hollinger and Diana S. Allen  
 Docket: 60027.0004US01/BS00318  
 Title: Automated Real-Time Appointment Control

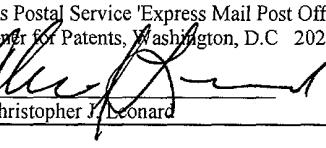
JC973 U.S. PTO  
09/09/01  
06/29/01

## CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number EL814838065US

Date of Deposit: June 29, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

By:   
Name: Christopher J. Leonard

## BOX PATENT APPLICATION

Commissioner for Patents  
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

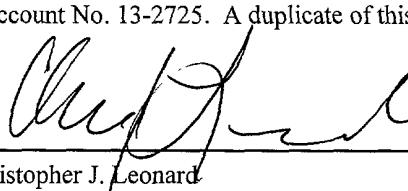
- Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- Utility Patent Application: Spec. 24 pgs; 22 claims; Abstract 1 pgs.  
The fee has been calculated as shown below in the 'Claims as Filed' table.
- 6 sheets of drawings
- A signed Combined Declaration and Power of Attorney
- Assignment of the invention to BellSouth Intellectual Property Corporation, Recordation Form Cover Sheet
- A check in the amount of \$746.00 to cover the Filing Fee
- A check for \$40.00 to cover the Assignment Recording Fee.
- Return postcard

## CLAIMS AS FILED

Number of Claims Filed	In Excess of:	Number Extra	Rate	Fee
<b>Basic Filing Fee</b>				\$710.00
<b>Total Claims</b>	22	20	x 18.00	\$36.00
<b>Independent Claims</b>	3	3	x 80.00	\$0.00
<b>MULTIPLE DEPENDENT CLAIM FEE</b>				\$0.00
<b>TOTAL FILING FEE</b>				\$746.00

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

MERCHANT & GOULD P.C.  
 P.O. Box 2903, Minneapolis, MN 55402-0903  
 (612) 332-5300

By:   
 Name: Christopher J. Leonard  
 Reg. No.: 41,940  
 Initials: CJL



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<b>Total Claims</b>				
22	- 20	= 2	x 18.00	= \$36.00
<b>Independent Claims</b>				
3	- 3	= 0	x 80.00	= \$0.00
<b>MULTIPLE DEPENDENT CLAIM FEE</b>				\$0.00
<b>TOTAL FILING FEE</b>				\$746.00

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